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INDICATION FORM**

Patent Number		6,852,703
Issue Date		February 8, 2005
First Named Inventor		Kingsman et al.
Title	Tumor Targeted Vector	
Art Unit	N/A	
Examiner Name	N/A	
Attorney Docket No.	31127/43655	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

OR

Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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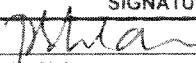
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature:  Date: 17 March 2008
 Name: Peter Nolan Telephone: +44 1865 783000

Title and Company: Senior Vice President of Commercial Development, Oxford BioMedica (UK) Ltd.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: 19 March 2008

Signature:  (David A. Gass)